PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

MAL002-003

									=			
	·	CLAIMS A	S FILED - (Column		_	(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			62				. .	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			62 mir	nus 20=	* (Įν		X\$ 9=	378	OR	X\$18=	
INDEPENDENT CLAIMS						15		X43=	645	OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			column 2	i	TOTAL	1468		TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)						(Column 2)		SMALL	FNTITY	OR	OTHER SMALL !	
_		(Column 1)				(Column 3)		JIII/122			JIIIALL .	_141111
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
•]'''		
								TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	าก 2)	(Column 3)	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	C: 4114	=		X43=		OR	X86=	
1	PIROT PRESE	NTATION OF MU	LIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	
								TOTAL DDIT. FEE		OR ,	TOTAL	
		(Column 1)										
T	\	CLAIMS		(Colum		(Column 3)	_			_		
MEN		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	1		Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un F		
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3.											+290=	
If the entry in column 1 is less than the intry in column 2, write "0" in column 3. **If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **TOTAL ADDIT. FEE												
Т	he "Highest Num!	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number	foun	d in the app	ropriate box	in colu	mn 1.	